

**OUTPATIENT CHILD AND ADOLESCENT MENTAL HEALTH SERVICES
PARENT CONSENT FORM**

1. A credentialed mental health care provider (i.e. child psychiatrist, pediatric psychologist, social worker) provides the following outpatient services to minor children and adolescents age birth to age 18: psychological/psychiatric evaluations, individual psychotherapy, medications, group therapy, parent training, family therapy and professional consultation.

2. "Minor" means a person under 18 years of age; except a person who is 15 years of age or older who is living separately and apart from his parent or legal guardians and is managing his financial affairs, regardless of his source of income, or who is married and living separately and apart from his parent or legal guardian (emancipated minor).

3. Notwithstanding any other provision of laws, a minor who is 15 years of age or older, whether with or without the consent of a parent or legal guardian, may consent to receive mental health services to be rendered by this clinic or a professional person. Furthermore, a minor who is 15 years of age or older or a parent or legal guardian of a minor on the minor's behalf may make voluntary application for hospitalization.

4. For children 15 years of age and older, the issue of patient confidentiality is typically sensitive to adolescents. Except for mandatory disclosures due to law or specific topics identified by the parent or legal guardian, this clinic will take the position that the treating therapist will determine what information in his/her professional judgment is appropriate to be shared with the parent concerning treatment issues, and what information, in the discretion of the therapist, will remain confidential between the adolescent and the therapist.

5. All information disclosed during the evaluation or therapy sessions is usually confidential and may not ordinarily be revealed to anyone outside the clinic without parental written permission. Disclosure may be required by Colorado State Law, Federal Law, or the U.S. Department of Defense. Disclosure might be made to child welfare agencies, law enforcement or investigative agencies. The following are some of the more important circumstances where release is required by law.

- a. Where there is a reasonable suspicion of neglect or abuse of people under the age of 18. Notification will be reported to the appropriate local authorities.
- b. Where the patient presents a serious threat to the life of others unless protective measures are taken.
- c. Where the patient presents a serious threat to his/herself unless protective measures are taken.
- d. Others where required by law or regulation.

6. When any person appears to be mentally ill, and as a result of such mental illness, appears to be an imminent danger to others or to himself or herself or appears to be gravely disabled, then an intervening professional may involuntarily admit the person to an appropriate inpatient facility.

7. The credentialed mental health professional keeps the only detailed records of your child's treatment under lock and key. Under certain circumstances, government agencies can obtain information from these records without your authorization. Your child's mental health or medical records are the property of the U.S. Government. For instance, military investigative agencies may review records in the course of a criminal or security investigation. Any release of such information will follow the limitations imposed by the Privacy Act, Freedom of Information Act, and AFI 41-210, *Patient Administration Functions*. Entries in your child's outpatient medical record will be at a minimum to maintain privacy balanced against a need for information documenting care and treatment.

I, THE LEGAL GUARDIAN OR PARENT(S), HAVE READ THE ABOVE, AND I UNDERSTAND AND ACCEPT FULLY THE PRECEDING CONDITIONS AS STATED IN EACH PARAGRAPH.

Parent(s)/Legal Custodian_____ Date_____
